

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AB	35C111	07-24-01
RESPONSE FORMALITY REVIEW	Rm	781	06-15-01

INDEX OF CLAIMS

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Rejected
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Allowed
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Canceled
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Restricted
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Appeal
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Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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